

CLAIMS ONLY

Application Number	10814109	Filing Date
Applicant(s)		

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*
	Indep	Depend	Indep	Depend	Indep	Depend			
1	1						51		
2		1					52		
3							53		
4		3					54		
5		3					55		
6	1						56		
7		3					57		
8		5					58		
9							59		
10		1					60		
11							61		
12		1					62		
13	1						63		
14		1					64		
15							65		
16	1						66		
17							67		
18							68		
19	1						69		
20		1					70		
21							71		
22	1						72		
23		1					73		
24							74		
25		3					75		
26	1						76		
27							77		
28		1					78		
29		3					79		
30							80		
31		1					81		
32		3					82		
33		3					83		
34		3					84		
35		3					85		
36		1					86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46		3					96		
47							97		
48							98		
49		3					99		
50							100		
Total Indep	7						Total Indep		
Total Depend	74	←	←	←	←	←	Total Depend	←	←
Total Claims	81						Total Claims		